

Vermont Mental Health Performance Indicator Project

DDMHS, Weeks Building, 103 South Main Street, Waterbury, VT 05671-1601 (802-241-2638)

MEMORANDUM

TO: Vermont Mental Health Performance Indicator Project
Advisory Group and Interested Parties

FROM: John Pandiani
Sheila Pomeroy

DATE: January 12, 2001

RE: Utilization of Atypical Anti-psychotic Medication by CRT Clients

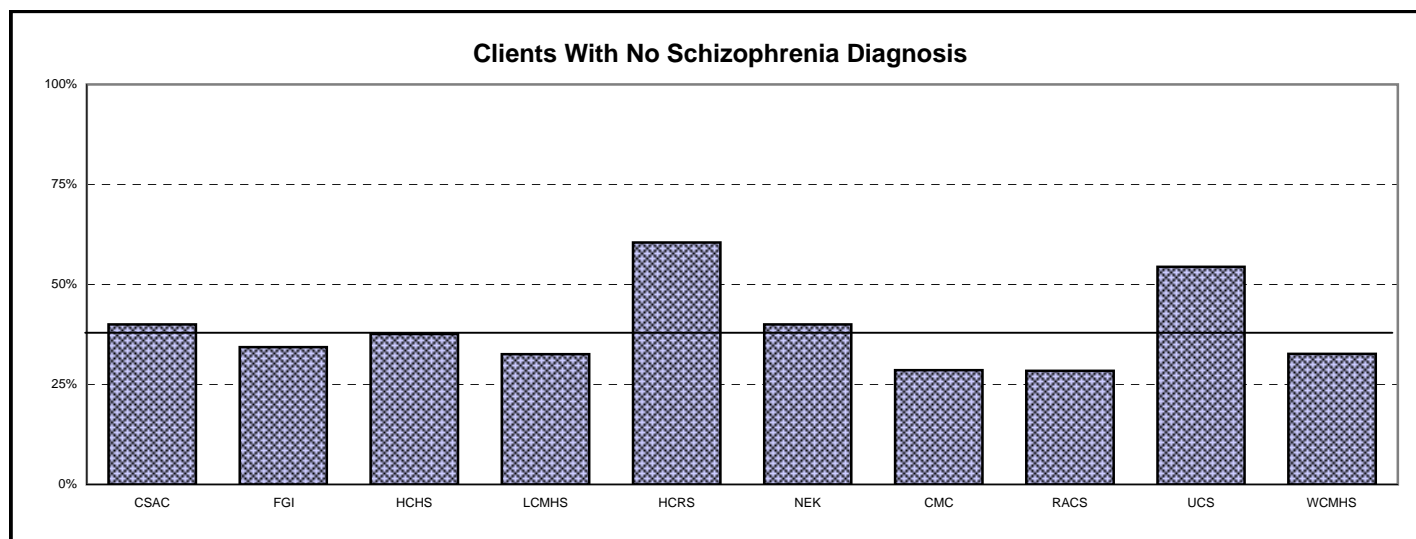
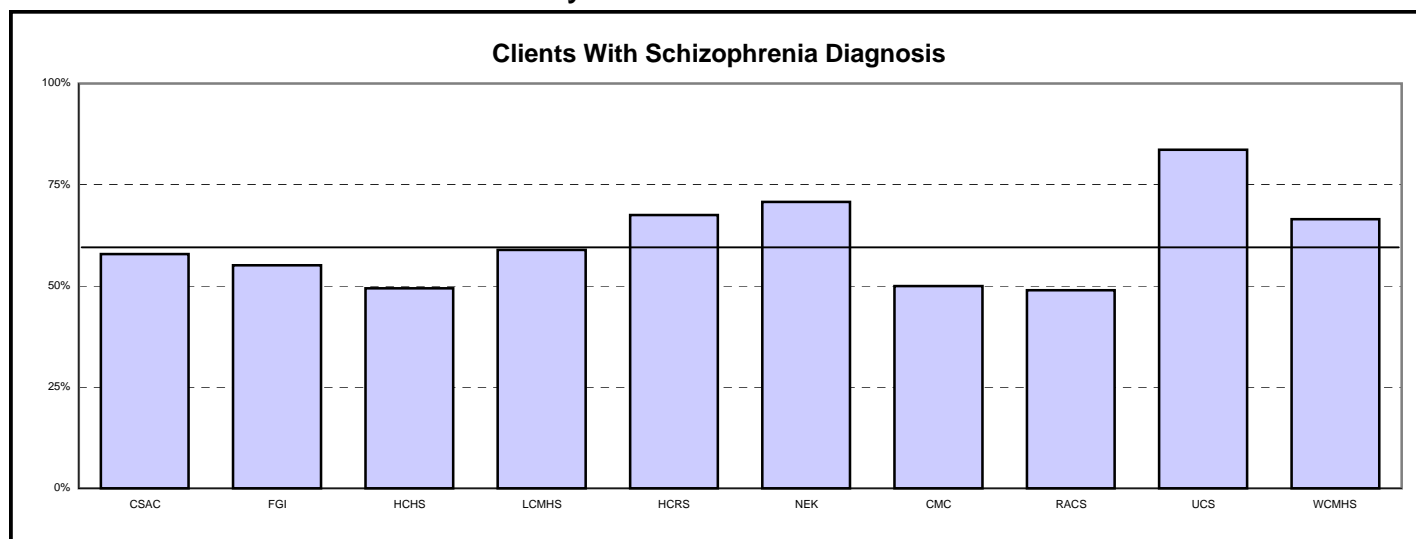
On December 8, 2000, we distributed our first overview of rates of utilization of new "atypical" anti-psychotic medications. As we noted, these medications are among the performance indicators we are preparing for the Sixteen State Performance Indicator project. This week we are following up on that PIP by focusing specifically on recipients of CRT services for people with severe and persistent mental illnesses. This week's report also distinguishes between people with a schizophrenia diagnosis and those without. The atypical indicator that will be used in the Sixteen State Project focuses specifically on people with a schizophrenia diagnosis.

The information used in this analysis was obtained from a combination of the Medicaid paid claims database and the Monthly Service Report data submitted to DDMHS by designated community mental health agencies. A description of the basic procedures for analyzing the Medicaid data is provided in the December 8 PIP (available under "data" at <http://www.state.vt.us/dmh/>). For this analysis, the Medicaid data were linked with MSR data to obtain information on program assignment and diagnosis.

As you will see, almost half (48%) of all Medicaid CRT clients served in 1999 received an atypical anti-psychotic medication during the year. A larger proportion of people with a schizophrenia diagnosis received atypical anti-psychotics than people who did not have a schizophrenia diagnosis (59% vs. 38%). The proportion of clients with a schizophrenia diagnosis who received an atypical anti-psychotic varied from less than 50% in Chittenden County to more than 80% in Bennington. The proportion of clients with no schizophrenia diagnosis who received an atypical anti-psychotic varied from less than 30% in Orange and Rutland counties to more than 60% in Southeastern Vermont.

We look forward to your comments on this measure of program performance and your suggestions for further analysis. Your comments and suggestions will be appreciated at 802-241-2638 or jpandiani@ddmhs.state.vt.us.

CRT Medicaid Clients Receiving Atypical Anti-Psychotic Medications Paid for by Medicaid By Clinic : FY1999



Clinic	Schizophrenia Diagnosis								
	CRT Medicaid Clients			No			Yes		
	Total	Receiving Atypical Anti-Psychotic Medication		Total	Receiving Atypical Anti-Psychotic Medication		Total	Receiving Atypical Anti-Psychotic Medication	
		Number	Percent		Number	Percent		Number	Percent
Addison - CSAC	137	65	47%	80	32	40%	57	33	58%
Northwest - NCSS	183	79	43%	105	36	34%	78	43	55%
Chittenden -HCHS	529	230	43%	266	100	38%	263	130	49%
Lamoille -LCMHS	116	57	49%	43	14	33%	73	43	59%
Southeast -HCRSSV	121	76	63%	81	49	60%	40	27	68%
Northeast -NEK	311	157	50%	205	82	40%	106	75	71%
Orange -CMC	86	34	40%	42	12	29%	44	22	50%
Rutland -RACS	278	107	38%	141	40	28%	137	67	49%
Bennington -UCS	164	107	65%	103	56	54%	61	51	84%
Washington -WCMHS	393	193	49%	202	66	33%	191	127	66%
Total	2318	1105	48%	1268	487	38%	1050	618	59%

Based on analysis of Medicaid Paid Claims files.

Atypical Anti-Psychotic Medications include Clozapine, Risperidone, Olanzapine, and Quetiapine.

Schizophrenia diagnosis includes DSM IV codes 295.00 thru 296.00.